



Concept Paper # 250

Presented to the Department of Administrative Services (DAS)

Date Prepared: March 19, 2013

Name of document to be reviewed:

Early ACCESS/Maternal, Infant, and Early Childhood
Home Visitation (MIECHV) - Coordinated Intake and Referral System

Document for review and approval:

- ☒ Request for Proposal (RFP)
- ☐ Request for Service (RFS)
- ☐ Request for Quote (RFQ)
- ☐ Invitation to Qualify

- ☐ Sole Source Procurement
- ☐ Statement of Work
- ☐ Staff Augmentation
- ☐ Master Agreement Purchase

NOTE: Sole source procurements will also need authorization from DAS Procurement for this type of purchase. Please also contact DAS Procurement at this location:

<http://das.gse.iowa.gov/procurement/solesource%202010.pdf>

Document for review only:

☐ Master Agreement

☐ Request for Information (RFI)

Agency: Iowa Department of Public Health, Bureau of Family Health

RFP Reference #:58813019

Release Date: Anticipating April 1, 2013

This project is requesting IOWAccess funds: Yes ☐ No ☒

NOTE: IOWAccess concept papers are to be sent to Wes Hunsberger (Wes.Hunsberger@iowa.gov) for an internal DAS review.

Projected cost over \$50,000? Yes ☒ No ☐

Projected agency staff hours over 750? Yes ☐ No ☒

IDPH staff time should not exceed 750 hours.

Successful applicants' staff hours will exceed 750 hours.



Project Cost, Funds and Funding Source:

Please list the internal and external resources/costs for the purchase:

Internal Resources/Costs: IDPH Executive Officer 2 and Community Health Consultant staff time.

External Resources/Costs: Successful applicants' cost will not exceed the amount awarded. The first award (July 1, 2013 to June 30, 2014) will not exceed \$379,400. For future contract years IDPH anticipates up to \$440,000 available per year.

Timelines:

July 1, 2013 to September 30, 2013 Contractor will work with current Early ACCESS Iowa contractor to transition the already existing Early ACCESS central directory to the successful applicant.

October 1, 2013 to December 31, 2013 Contractor will plan the expansion of the website, online directory and phone line to include family support and group based parent education information.

January 1, 2014 to June 30, 2014 following this planning period the Contractor shall develop not only the new website but also marketing materials that will provide the public awareness of the statewide coordinated intake and referral system. Referrals to other community resources will occur during the first contract year and callers will be linked to those resources.

In subsequent contract years (years two through six), the Contractor will work to expand the directory and website to include the larger early care, health, education, and humans services delivery system as well as continue to answer online and phone inquires and provide information and referrals to callers.

The RFP is asking applicants to provide work plan with actions steps and timelines.

Goal:

The goal of the project is to provide an efficient, consumer-friendly and effective coordinated intake and referral system that will provide child development education and link families to early intervention, family support and other community resources information and resources in Iowa. The coordinated intake and referral system is for families, child health care providers, and other professionals seeking information, support and referral for young children ages zero to five. Families, child health care providers, and other professionals will have access to a website and toll free number to make referrals and obtain information about family support, IDEA Part C early intervention (Early ACCESS services, including information on newborn hearing rescreens) and other needed community supports in Iowa.

Background:

The Early ACCESS system has had a central point of contact and directory operating for several years. Currently VNS of Polk County has the contract to complete the work on behalf of the Early ACCESS system. The Early ACCESS system currently has a website www.earlyaccessiowa.org, toll free line (1-888-IAKIDS1) and online directory. The current contract for the Early ACCESS central point of contact and directory is issued by the Department of Education. The current contract issued by the DE ends June 30, 2013) and a new RFP has to be issued to continue the work. It is in the Federal Rules that Early ACCESS has a statewide central point of contact and directory. So by law, Iowa's early intervention system (in Iowa we call the system Early ACCESS) must have this website, phone line, and online directory.



Instead of the Department of Education issuing an RFP for the Early ACCESS central point of contact and directory, the Department of Education is going to collaborate with IDPH- specifically the Maternal, Infant, and Early Childhood Home Visitation (MIECHV) program here at IDPH and a joint RFP by both programs will be issued. IDPH will issue an RFP that will meet needs of the MIECHV programs grant requirements and the Early ACCESS federal Individuals Disabilities Education Act rules and regulations. This joint RFP will maintain the already existing Early ACCESS central point of contact and directory and expand the directory to include family support, group based parent education programs as well as additional community resources available to families with children ages zero to five years. In past years, the Early ACCESS central point of contact answered approximately 920 calls in a fiscal year. Early ACCESS and Maternal, Infant, and Early Childhood Home Visitation programs are seeking a Contractor to provide coordinated intake and referral for Early ACCESS and family support as well as respond to a variety of other needs of callers and connect callers to appropriate resource/agency. IDPH anticipates, after marketing of the statewide coordinated intake and referral system, that the contractor may answer as many as 2500 calls a year.

The Contractor will receive a wide range of phone calls related to child development, learning, and behavior. Some families may need a hearing rescreen, or may have recently received a diagnosis of their child's condition and are seeking to understand the condition and accessing needed services and resources. Other families are beginning to identify their concerns and are looking for sources of information and support designed to promote healthy development; such as parent education or group based education and support. Not all of these children will have a disability or have a need for special education now or later in life. In addition, these families have typical needs such as food, housing, healthcare, and child care.

Experience has shown that, on average, it takes approximately 12 phone calls to connect a family with concerns about a child's behavior to the needed service. This kind of burdensome process can impede children from getting services they may need. A toll-free number, staff by individuals who are knowledgeable of state and local resources can eliminate the burdensome process families may go through. The toll-free number is one effective method to connecting to and supporting callers and triaging callers to appropriate services. Another method to be used by the Contractor to connect and support families of young children will be through a website and online directory.

Coordinated intake and referral specialists need to establish a safe and trusting relationship with the caller/family. Therefore intake and referral specialists must be able to take cues from caller/family to determine how much information can be elicited without overwhelming or disengaging them. Together, with the caller/family, the intake and referral specialist develops a plan of action, which may be a referral to a particular program or local/area coordinated intake entity (if established), sending information to the caller to help with decision making, or giving information to the caller/family so that they may contact a resource on their own. If caller/family accepts a referral, they should be connected via phone (patched through) to resource/agency. Follow-up is provided to callers/families to ensure that they were connected to services or see if any additional issues that need to be addressed.

In addition to building relationships with families who have children zero to five years, the coordinated intake and referral specialists need to establish relationships with early care, health, and education providers who will serve as referral sources to the coordinated intake and referral system. A key to developing strong relationships with referral sources is by assuring that referral sources are informed of the



outcome(s) of the referral made to the coordinated intake and referral system. Therefore strong communication with referral sources is required.

Expected Results:

- The coordinated intake and referral system will be in a unique position to collect data that reflect system-level issues- information not only on who calls and why, but also on what happens to families seeking information and assistance. This will assist the State identify of gaps in and barriers to services.
- Caller needs are appropriately identified and caller is matched to resources/services through use of interview and standardized screening tools.
- Callers receive timely and accurate information about family support, Early ACCESS- early intervention services, virtual home visitor system, early care, health, and education resources, and appropriate community agencies.
- The Early ACCESS website is expanded and redesigned so that it educates Iowans on family support and Early ACCESS.
- The website contains an accurate online directory that connects individuals to family support services, Early ACCESS- early intervention services, community-based and national services/agencies that address specialized and typical child/family needs and Iowa's collaborative early care, health and education system known as Early Childhood Iowa: <http://www.earlychildhoodiowa.org/parents>.
- Communication between referral sources and the child's local family support program, Early ACCESS office, and local early care, health, and education programs to assure families are connected and referral sources are informed of result of referral.
- Transition of families moving to Iowa who need to continue family support or early intervention services their child received in another state is facilitated.
- Coordinated intake and referral system is promoted across Iowa resulting in an increase of web hits and phone calls.
- Quarterly Quality Assurance calls and annual satisfaction survey data demonstrate achievement of project outcomes.
- Evaluation of the effectiveness of the statewide coordinated intake and referral system is developed and conducted.

What are the tangible and intangible benefits of this purchase for this agency and/or state government?

Can these benefits be quantified in financial terms? If yes, please explain.

No.

How will you be more effective as a result of this purchase?

The Early ACCESS system is required by law to have a have central point of contact and directory. The MIECHV program as part of the expansion grant is required to develop a coordinated intake and referral system. Early ACCESS and MIECHV serve the same age group and work with or have potential to work with many similar families. In an effort to best use funding provided and to not create two systems that would duplicate one another, Early ACCESS and MIECHV are collaborating on this project to develop one system that will meet federal and grant requirements.

How will service to your customers be enhanced as a result of this purchase?



Families of children 0 to 5 years will have one place they can go for information and referrals relating to children development, behavior, intervention, family support as well as other national and community resources. The coordinated intake and referral system will empower families to be their child's first teachers and will enable them to meet the educational, social-emotional, and basic needs of their children.

Referral sources individuals who work with families (i.e. healthcare providers, social service providers, child care providers), will have a one stop place that they can refer families for educations and referral. The website and toll free number will not only help referral sources meet the needs of the families they work with, but the Contractor will be expected to follow up with referral sources and inform them of the outcomes families experienced as a result of the referral to the coordinated intake and referral system.

Great customer service, this includes timely and responsive communication to callers (both families and referral sources) will be what enhances the customer experience with the coordinated intake and referral system.

Testing and Acceptance:

Development and implementation of the deliverables will be approved by the application team, Early ACCESS and MIECHV program staff.

Some of the Interested Parties:

- Families with children ages 0-5 years who live in Iowa or are looking to move into the State.
- Providers who work with families (i.e. physicians, child care providers, social services, family support, schools, etc).
- Part C Early Intervention (i.e. Early ACCESS) signatory agencies: Department of Education, IDPH, Department of Human Services, Child Health Specialty Clinics and Early ACCESS regional grantees.
- MIECHV Program and MIECHV grantees.
- Early Childhood Iowa.

Some of the Recipients of this Service:

- Families with children ages 0-5 years who live in Iowa or are looking to move into the State.
- Providers who work with families (i.e. physicians, child care providers, social services, family support, schools, etc).
- Part C Early Intervention (i.e. Early ACCESS) signatory agencies: Department of Education, IDPH, Department of Human Services, Child Health Specialty Clinics and Early ACCESS regional grantees.
- MIECHV Program and MIECHV grantees.

Standards:

DAS IT standards will be required to be followed by Contractor.

Architecture:

The RFP is asking the Contractor to advise on development and implementation of online communications.

Business Continuity / Disaster Recovery:

The Contractor will assure online system performance, maintains database software, installation and testing of software. Assures system and documents are backed up



Recommendations from the State CIO:

NOTE: Where applicable, all DAS GSE Procurement and IA Administrative Code 11-105 and 11-106 requirements and procedures are to be followed. Reference: <http://das.gse.iowa.gov/procurement/>, specifically: <http://das.gse.iowa.gov/procurement/adminrules/>.

Duplication recommendation from the State CIO to the DAS Director:

- a) Is there duplication within Government? *(Please identify duplication at the agency level, as well as within the enterprise)*
- b) Can an existing program be modified to address a new need?
- c) Do you have any similar program in existence?
- d) Have you sought IT procurements for similar programs in the past?
- e) Do you have purchasing documents for similar programs?
- f) Do you have similar purchasing documents that could be used as a starting point for this program?
- g) Is there anything you could provide that could assist the agency with this IT procurement?
- h) Are there alternatives available to the agencies?

Recommendation of the State CIO to the DAS Director:

Authorize this IT procurement Yes X No ____

Alternatives suggested by the State CIO
(see comments below) Yes ____ No X

Additional comments from the State CIO:

A presentation was given on the project, and the TEC recommended approval for DPH to proceed with the RFP and to see what other states have. The IT request was subsequently approved by the CIO.

DAS Director's action:

Authorize this IT procurement Yes X No ____

DAS Director's signature and date:

The above IT procurement concept approved by Director Carroll on 4/23/13

Comments: **None.**